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PATENT APPLICATION, FEE DETERMINATION RECORD Substitute for Form PTO-875											
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL E	NTITY	OR	OTHER SMALL I	
			FILED	NUMBER	EXTRA	Ŀ	RATE	FEE		RATE	FEE
BASIC	FEE	-						3	OR		5
TOTAL CLAIMS		+	mirus 20 °	1.		Γ	× 4•	·	OR	x 5	
D7 OFR 1.16(1) MOEPENDENT CLAIMS				1.		Γ	x \$*		OR	X5*	
	R 1.16(b))		ninus 3 °				+: •		OR	+5	
MALTIPLE DEPENDENT CLAM PRESENT (07 GFR 1.1661)							TOTAL		OR	TOTAL	
* If the difference in column 1 is less than zero, enter "O" in column 2.											.
	CLAIMS AS AMENDED - PART II						SMALL	FMITTY	OR		THAN ENTITY
	~02.	(Column 1)		(Column Z)	(Column 3)	١٢			1	RATE	ADD
4	مربي	REMAINING AFTER	١,	NUMBER REVIOUSLY	PRESENT EXTRA		RATE	ADOI TIONAL FEE	+-	~····	TIONAL FEE
	<u> </u>	THEMONENA	Minus .	PAID FOR	-	l	**		OR	x 8	
 <u>8</u> .	GT CFR 1.45(4)	<u> </u>	Minus	9					08	× .	
. ~ -	independent or ora users			10		П	X		1		
1	FIRST PRESENT	TION OF MALTPLE	0896081	TOUR DIO	R 1.15(0))	TOTAL		OR	TOTAL	
							ADD'L FEE	L	J on	ADD'L FEE	L
IRC	ElAndt	(Column 1)		(Catuma 2)	(Column 3)	- 1			7		
-	11-2-05	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT		RATE	ADDI-		RATE	ADDI- TIDHAL
	II au	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA			FEE	4		FEE
NDMENT	Total promiuso	. 11	Minus	"3 2 ·	*		x 5		OR	x 3•	11
	Independent provinces	· 🖰	Minus	""10	1.]	x 5	1	OR	x 5•	
AME	FERST PRESENTATION OF MATTPLE DEPENDENT CLAIM (17 CFR 1.16(4))						+3=		_ OR	+5 .	<u> </u> '
٢	PRIST PRESENTATION OF MILITINE OF PRICE!								OR	TOTAL ADD'L FEE	
10/06											
L.,		(Column 1)		(Cotemn 2) HIGHEST	(Column 3)	7	1	ADDI	7	RATE	ADDI
S F		REMAINING AFTER		NUMBER PREVIOUSLY PAID FOR	PRESENT		. RATE/	TIONAL		1	TIONAL FEE
1 113	Total	AMENOMENT	Mins.	32	1./	1	Xe_l.	ſ.	ممر ل	x 5	
ENDM	tridopendent pr CFR L.NGOS	. 2	Minus	-10	1/	Y	x3	<u> </u>	∦ 0₽	×3	_
A A		ST PRESENTATION OF MATTPLE DEPENDENT GLASS (3) CFR 1-18(2)					.,	1/	OR	<u></u>	
PROT MESONIAILMENT MAIN AS OF SHAPE							TOTAL ADD'L FEE		OR	AJU'L FEE	
l	e tithe enter in a	column 1 is less th	en the entr	in column 2, w	rite TV" in colum	yn 3.		L			
١.	• I the "Highest	potumn 1 is less th Number Previous Municipal Previous	ly Paid For ly Paid For	IN THIS SPACE	E is less than 2 E is less than 3	oni.	nter "20". er "3". number found	in the source	viste box i	e column 1.	

The "Highest Number Previously Paid For" (Total or Independent is the highest number found in the appropriate box in column 1.

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public intime is to fine Independent of Independent of Independent of Independent Industry of Industry of

If you need assistance in completing the form, call 1-500-PTO-6199 and select option 2.